OFFICE OF THE INSPECTOR GENERAL DMHMRSAS

SNAPSHOT INSPECTION SOUTHERN VIRGINIA MENTAL HEALTH INSTITUTE

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OIG REPORT # 60-02

EXECUTIVE SUMMARY

A Snapshot Inspection was conducted at the Southern Virginia Mental Health Institute in Danville, Virginia during May 6 - 7, 2002. The purpose of a snapshot inspection is to conduct an unannounced review of a facility with a primary focus on three quality of care areas. The areas are as follows: the general conditions of the facility, staffing patterns and concerns and the activity of patients.

Overall, the facility was clean and well maintained. Recent renovations changed the placement of the nurses' station, which has resulted in increased opportunities for interactions between the staff and patients. Patients related feeling both safe and comfortable within the facility.

Staffing patterns were noted to meet the expectations outline by policy and procedures for this facility. Nursing staff were identified by the patients as most the staff members most significant in their recovery process.

The facility provides individualized treatment planning. There was evidence that the patients were provided with multiple opportunities to participate in the development of treatment and discharge planning.

Facility: Southern Virginia Mental Health Institute

Danville, Virginia

Date: May 6-7, 2002

Type of Inspection: Snapshot Inspection / Unannounced

Reviewers: Cathy Hill, M.Ed.

Heather Glissman, BA

Purpose of the Inspection: To conduct an inspection of the general environmental conditions, staffing patterns and active treatment.

Sources of Information: Interviews were conducted with clinical and direct care staff. Interactions with residents occurred. Documentation reviews, included but was not limited to; patient(s) records, staff schedule sheets, program descriptions and activity/program schedules. Activities and staff/patient interactions were observed during a tour of residential areas in the facility.

GENERAL ENVIRONMENTAL ISSUES

Finding 1.1: The facility was clean, comfortable and well maintained.

Background: Tours were completed of the facility during the evening shift of May 6, 2002. The facility is divided into four units, which serve 18 patients each, with a census of 72. Overall, the facility was noted to be clean, comfortable and well maintained. SVMHI has completed several environmental updates, including the completion of an asbestos abatement project. The project resulted in the environment being updated, appearing less institutional. SVMHI has created a more home-like environment through the use of photographs, patient artwork and other pictures, and through the creation of different groupings of furniture, which allows for increased interaction and affords increased privacy in conversation during visits.

The nurses' station was renovated during the floor tile replacement project. The previously large half-circle desk located in the dayroom area was removed expanding the available dayroom space. The current nurses' stations are located about mid-way down each residential unit's hallway. Interviews with both nursing staff and patients revealed that this arrangement has allowed for increased opportunities for interaction between the staff and patients.

All of the ten patients interviewed indicated that they felt safe and comfortable in the environment. They indicated that they were allowed to display personal items and encouraged to create artwork for display within the facility.

Recommendation: Maintain this environment while continuing to explore additional ways of updating this environment.

STAFFING ISSUES

Finding 2.1: Staffing patterns were consistent with defined facility expectations for evening coverage.

Background: There was at least one RN for each unit during the time of the inspection. There was also a nurse shift administrator Staffing patterns were as follows:

E Unit 1 RN 2 HCSWs for 16 patients

F Unit 2 RNs 2 HSCWs for 20 patients

G Unit 2RN 3 HSCWs for 19 patients

H Unit 1 RNs 2 HSCWs for 19 patients

Recommendation: Continue to maintain staffing patterns for providing adequate coverage.

Finding 2.2: Patients identified the nursing staff as having the most significant impact on their recovery process.

Background: Ten patients were interviewed during the inspection. All indicated that nursing staff were the most helpful in their recovery process. They related that the nursing staff took the time to talk with them, address concerns and found ways to assist them in everything from maintaining their clothes to understanding their medications.

The inspection took place during nurses' appreciation week. None of the staff were aware of any activities planned for the week, which were designed to recognize these hardworking individuals. Administrative staff were also unable to identify any planned activities, but spoke of events that had occurred during previous nurses' appreciation week.

Recommendation: With identified concerns regarding the use of overtime and recruitment and retention problems state wide for nursing staff, this facility needs to formally recognize the efforts of this group of workers identified as the most helpful by patients.

Finding 2.3: SVMHI is reducing funding for staff training for FY 2003.

Background: OIG inspection team interviews with administrative and direct care staff indicated that in FY2002, the facility had committed funding for career advancement and professional training that created an environment of opportunity. All direct care staff commented that they were trained in the facility with a constant offering of inservices that were applicable to the patients they were responsible for treating. In addition they relayed that they knew many or had themselves been able to participate in off campus educational experiences. In the past, the facility had been able to dedicate approximately \$13,000 for travel to professional conferences and professional educational stipends. An additional five thousand dollars was used to bring in professional experts.

The facility has reported that for FY 2003, budget reductions will prohibit SVMHI from dedicating any funding for travel and stipend funding. This will not affect the inservices that are provided internally rather it will discontinue funding for professional conferences and professional educational stipends.

Recommendation: Work with the Central Office to formulate availability to continue career advancement education for professional and direct care staff.

ACTIVITY OF PATIENTS

Finding 3.1: Evening active treatment and leisure activities were available for patients.

Background: SVMHI provides for a variety of active treatment programs for the patients. The inspection team was onsite during a Monday evening second shift. Interviews and observations revealed that a variety of activities were available. A socialization group was occurring at the time of the tour. A number of patients were participating in an evening recreational activity in the gym. Visiting hours were also occurring and several patients were engaged in conversation with family members. Several clusters of patients were engaged in structured card games.

Recommendation: Continue to develop programming choices for patients that addresses individual needs.
Finding 3.2: Treatment planning is individualized and designed to meet the patients' treatment needs.
Background: Interviews were conducted with ten patients during this inspection. All of the patients were able to identify treatment goals and barriers to their discharge. Each spoke of the many opportunities they have had to participate in the development in their treatment and discharge planning. Eight out of the ten were able to identify their medications and its purpose. One patient indicated that it was his belief that SVMHI had actually saved his life. He spoke of his twenty year battle with his mental illness and indicated that having the option to enter this facility when his "grasp on reality was fragile" enabled him to get the assistance he needed to remain a productive citizen.
Recommendation: Continue to actively involve the patients in their treatment planning process.
Finding 3.3: SVMHI has closed the token store.
Background: Patients interviewed indicated that they were upset when the facility decided to close the token store due to budget reductions. Administrative staff related that the decision was discussed with the patients. The facility will consider reopening the token store if funding becomes available.

Recommendation: None.